

## A Tale of Three Texts: Treatments for Transsexualism

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Published online: 6 June 2008  
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**Transsexual and Other Disorders of Gender Identity: A Practical Guide to Management.** Edited by James Barrett. Radcliffe Publishing, Oxford, England, 2007, 298 pp., £35.00

**Principles of Transgender Medicine.** Edited by Randi Ettner, Stan Monstrey, and A. Evan Eyler. Haworth Press, New York, 2007, 363 pp., \$89.95

In addition to the two assigned 2007 texts, I include the 1969 “Transsexualism and Sex Reassignment” co-edited by myself and John Money. This comparison helps chart four decades’ evolution in this exotic zone of sex and gender.

The goal of each text differed. Reflecting its time, Green and Money (1969) produced “...a scientific forum representing data and views of those few scientists currently investigating transsexualism and sex reassignment...It is hoped that this compilation will help dispel some prejudices, promote further serious investigation and remove another area from the realm of superstition by subjecting it to scientific scrutiny” (p. xvi). Ettner et al. wanted to provide “a complete compendium of all aspects of medical and health care...to meet the needs of gender clients” in a text revealing “a tapestry of art and science [that is] rich and mosaic” (p. xxiv). Barrett noted the need for a book on the “practicalities of treatment...a text for everyday clinical use” (p. viii).

The first Ettner et al. chapter is on the etiology of transsexualism. Barrett omits this topic. It might have been better if both did. Authorship requires scholarly mastery in several disciplines. Ettner et al. falter at the start. On p. 1, the reader is

told that Christine Jorgensen left the United States as a young enlisted soldier and returned as a female and that, prior to her 1952 return, there was no recognition of the existence of gender dysphoria. George Jorgensen had left the army and was living in the US for about 4 years before travelling to Denmark (Jorgensen, 1967). Sex-change surgery was reported in Europe 22 years earlier (Abraham, 1931) and 20 years earlier there was the widely noted book about the sex change of a Dutch painter (Hoyer, 1933).

The etiology chapter continues with divisions into psychoanalytic and biologic research. Amidst the early psychoanalytic explanations is a lengthy quote attributed to Meyer-Bahlburg, not heretofore known as a psychoanalytic theorist. Puzzled, I emailed him asking whether the quote was his. The reply: “Absolutely not me. I wouldn’t even know what this means” (H. F. L. Meyer-Bahlburg, personal communication, January 14, 2008). A chapter omission is a real psychoanalyst, Stoller (1969), who did make a seminal contribution. The notorious Johns Hopkins report by a psychoanalyst that helped derail the pioneering sex-change program (Meyer and Reter) is cited, but a paper rebutting it (Fleming et al.) is included at chapter’s end in the reference list, but not in the text.

The biologic section suffers from uncritical reporting. For female-to-male transsexuals, there is the “anomalous inframammary ligament,” implying uniqueness to transsexuals. My literature search on this previously (to me) unknown significant finding revealed that it is generally present in females (“an intrinsic dermal structure”) (Boutros et al., 1998). The much heralded post-mortem brain study of a few male-to-female transsexuals finding a cross-sex difference in a section of the bed nucleus of the stria terminalis is reported, but not critiques of the possible significance. One is that the brain sex difference in non-transsexuals does not appear until young adulthood, years after transsexuals typically manifest cross-sex identity and behavior.

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Two studies are cited reporting increased rates of non-right-handedness in transsexuals, but the reader is not informed why this might be relevant to etiology (I know why because I authored one of the papers). Finally, the most space (nearly a page) is devoted to a theory of transsexual development, apparently unpublished in a peer-reviewed journal after a conference presentation in King of Prussia, Pennsylvania, 11 years ago.

Surgery chapters after four decades reflect substantial advances. Both 2007 volumes only include European surgeons (perhaps the private practice ethos of American medicine makes it too costly to take time to write). Although only modest progress has been made in basic principles of vaginoplasty and mastectomy, there are new contributions on vocal pitch surgery, facial surgery goals, and the use of the colon in vaginal construction. The biggest thrust has been with phalloplasty. Comparing the results in 1969 with those in 2007 is startling. While surgeons cannot be expected to portray their cock-ups, their successes are artistic. (I wondered why surgical chapters were included in Barrett when the book's goal was "a text for everyday clinical use.") Perhaps a caveat was needed: Do not try this without further training.) And Monstrey, a very skilled surgeon, is less the historian. Regarding Christine Jorgensen, Fogh-Anderson, the surgeon in Denmark, did not perform vaginoplasty for Christine in 1952. That surgery took place later in the US (Jorgensen, 1967; Meyerowitz, 2002). And the first US hospital to follow Johns Hopkins with a sex-change program was the University of Minnesota, not a hospital in Chicago or Stanford (Hastings, 1969). Finally, a query: Is the procedure for constructing a micropenis metoidioplasty (Barrett) or metoidoplasty (Ettner et al.) (a small point).

Welcome additions in Ettner et al. are chapters on primary medical care, preventive care, and the elderly transgendered. Preventive care could have benefited from the surgical knife of the editor Monstrey. It is the longest chapter and only five pages shorter than the two on adult mental health and transgender coming out stages, combined.

The clear strength of Barrett is the string of chapters authored by the editor. The variability of presentation of persons on the gender/sex spectrum, with co-varying complications and diagnostic puzzles, is extensively and clearly presented in many vignettes. These can be very helpful to the uninitiated practitioner who rarely is confronted with a gender dysphoric patient. Indeed, an expanded version could have sufficed as the entire text. Barrett also includes a chapter on the role of the speech and language therapist and, uniquely, the relevant theological perspectives of eight religions!

Autogynephilia is a current hot topic, a controversially described subgroup of male transsexuals (Bailey, 2003; Dreser, 2008). You would never know it from Ettner et al.; it is not mentioned. A Barrett omission is a chapter on children or

adolescents with gender identity disorder. Probably this is because the London Charing Cross clinic treats adults only. However, the book's goal is "practical treatment for everyday clinical use." Surely, children and adolescents with gender dysphoria live in the UK and guidance to general practitioners is necessary. The diagnosis and possible intervention with children is difficult and controversial and sex steroid treatment in adolescence is an endocrinological frontier.

Absent from the 2007 texts, but present in 1969, is aversion treatment for transsexualism. The once popular treatment for "deviant" sexuality, particularly homosexuality, is long gone.

What's in a name? What term for gender dysphoric persons seeking sex-change? Barrett has little problem here. Nearly always they are transsexuals, male-to-female, female-to-male. But Ettner et al. are all over the place. They can also be transmen, transwomen, transsexual men, and transsexual women. Inconsistencies are found within a single chapter. That is not the only name confusion. What is the professional association dedicated to the study and treatment of this patient group? Is it The Harry Benjamin International Gender Dysphoria Association (named for the pioneer to whom Green and Money and Ettner dedicated their texts) or is it the World Professional Association for Transgender Health? In Ettner et al., the names are used inconsistently from chapter to chapter. Even the foreword and afterword cannot agree. The Ettner editor (presumably Series Editor) notes that as the book went to press, the Association "officially" changed its name. But, as the book was published, this "official" change was challenged as a violation of the Association By-Laws.

Having suffered the pains of text editing (30 plus years ago, I wrote: "I swore I wouldn't edit another book" as I took off on another near kamikaze mission) (Green, 1975, p. v), I consider myself qualified to point out others' editing pratfalls. A sampling from Ettner et al.: two references to Stoller in the chapter text (p. 173) neither included in the reference list at chapter's end, with the name finding its way to the full book index, misspelled as Stroller. Reference names cited in text without publication year (p. 4), duplicate inclusion of a reference (Wren, pp. 282–283).

Why the sudden ejaculation of transsexual texts? Certainly, they are not premature. After the 1969 "Transsexualism and Sex Reassignment," the field was relatively inert—Steiner (1985) and Walters and Ross (1986) with their text uniquely titled, "Transsexualism and Sex Reassignment." Perhaps the flurry reflects transgenderism and transsexualism as more visible and accepted, with a greater number of clinicians and researchers recognizing how their work can contribute. I anticipate another long hiatus, at least from North America and Europe. Hopefully, this will not be so from the regions where most gender dysphoric persons suffer in silence.

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